

Middle Articles

CONTEMPORARY THEMES

Leontine Young and "Tess of the d'Urbervilles"—Some Thoughts on Illegitimacy*

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In England and Wales in 1962 55,376 (6.6%) out of 838,000 live-born babies are known to have been born out of wedlock. In 1945 the peak of 9.33% could have been explained by the unsettling conditions of war, but something else must be the cause of the present rising trend (1922-39 from 4.0 to 4.5%; 1949-59 from 4.5 to 5.0%). Although now dubbed the baby of an unmarried mother, the bastard remains in law illegitimate, and in the society that matters, among neighbours and friends, he is a family disgrace.

The Doctor's Attitude

Any good prophylactic programme attacks causes, which must first be identified and understood. Unfortunately all concerned, including the doctors who give advice both of a general kind and to individual patients, develop their ideas in a hothouse of prejudice and emotion, into which the cold air of observed phenomena is not encouraged to enter. The doctor's attitude depends on beliefs, on ethical and moral concepts, and is affected by the climate of ambient opinion whether shared by him or resisted.

Pity usually dominates the present attitude of obstetrician, paediatrician, and family doctor towards the poor wronged girl, who needs protection from the biological consequences of an act unwillingly, even unknowingly, performed. Her pregnancy must be concealed from neighbours, from parents if she so wishes; she should not see her baby, certainly not breast-feed it; and were it possible she should be delivered through an invisible caesarean-section scar. Immediate adoption must be arranged. This revolutionary biological happening, this bringing into life of a new man, must be scaled down to the size of a minor operation to be forgotten at once. The mother must be denied the experience of motherhood.

Sometimes she is seen as a wicked girl to be scorned, handled harshly and punished, delivered without analgesia, by an indignant midwife. In either case the short-term view prevails, the long-term problem is ignored.

Seldom is the background carefully studied. The old commonsense explanations are accepted—immorality, flighty behaviour, carelessness, rape, or sexual experiment among the young. Two new facts are forgotten. The first is that, with efficient contraceptives, sexual intercourse can be separated from the act of procreation. And, secondly, the act of procreation can by artificial insemination be separated from the emotional upheaval of sexual intercourse.

Busy doctors prefer short-term views. Looking at human problems in depth takes time, and may be beyond the physician's range, but for novelist, as for poet, it is vital. What novelist and poet write enlarges for both physician and patient experience of the human condition. The serious novel as a criticism of life influences the general climate of opinion and general attitudes towards biological problems, affecting in this way many who have not read a single page.

Exploration of the Problems

Three novels, among many that explore the problems of sex, illustrate changes in society's outlook; the oldest, Hawthorne's *Scarlet Letter*, Lawrence Durrell's recent series, and, perhaps most influential of all, Hardy's *Tess*.

Nathaniel Hawthorne

In the century-old *The Scarlet Letter* Hawthorne tells the melodramatic story of Hester Prynne, who, married to a man much older than herself, falls in love with a young parson, Arthur Dimmesdale. In New England the birth of elfin, illegitimate Pearl makes of Hester an outcast who wears an embroidered scarlet letter "A" over her bosom. Through suffering patiently borne, she achieves salvation, though Dimmesdale is destroyed by sin and guilt. Pearl has something wrong in her nature, "the effluence of her mother's lawless passion." "The mother's impassioned state," writes Hawthorne, "had been the medium through which were transmitted to the unborn infant the rays of its moral life." "In giving her existence a great law had been broken." With the background of a moral code which no longer rules, this tale has little power to move the modern reader.

Thomas Hardy

With *Tess* it is different. Thomas Hardy and his famous heroine do still influence the modern mind. In this novel Hardy "sought to give artistic form to a true sequence of things." Contemporary critics in the 'nineties questioned whether the subject was "fit for art"—what happened after the asterisks which coyly separate phase one, "The Maiden," from phase two, "Maiden no more."

Now that asterisks have been swept away like so many cobwebs, and four-letter words in full array exhibit the community's breadth of mind while proving the author's virility, a different question arises. Does what Hardy called "the sequence of things" reveal a truth? The subtitle is "A Pure Woman."

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Tess begins as "a mere vessel of emotion untinctured by experience." "Phases of her childhood lurked in her aspect still." Throughout, Hardy is at pains to describe her nobility of mien, the sense of goodness that her presence radiated. After her seduction by Alec Durberville, Tess saw herself as a figure of guilt, although she "didn't understand until too late." Her peasant mother's verdict was, "Tis nater, after all, and what do please God." Hardy makes her continued progress towards Heaven acceptable despite adultery and murder, because he believed that only a "social law" was broken, not one "known to the environment." "Alone in a desert island would she have been wretched at what had happened to her?" "But for the world's opinion those experiences would have been simply a liberal education."

Angel Clare could not accept her as pure, rendered impotent as he was on his wedding night by her tale of her seduction. His challenge—"If Alec Durberville were dead it might be different"—led inexorably to Alec's murder by Tess, to the strange night at Stonehenge, and to the gallows.

The vision of Tess as purity personified, suffering because she transgressed not Hawthorne's "great law" but only the social code of behaviour of her time, remains part of the culture of to-day. Is it Tess whom the obstetricians and the family doctors see in their consulting-rooms, Tess whom they seek to protect from harsh biological experience, Tess for whom the protagonists fight for the right to abortion? But the truth of Tess is a little suspect, since Sigmund Freud has also entered the culture of to-day. And Freud has slaughtered the innocence of childhood with the sharp dagger of infant sexuality. Inside every good girl is a naughty girl trying to get out and often succeeding.

Lawrence Durrell

For Lawrence Durrell's characters there is not even a social code to transgress. He acts as the literary midwife to quadruplets—Justine, Balthazar, Mountolive, Clea—conceived by a mating on the library shelf between Baedeker's *Guide to Alexandria* and Krafft-Ebing's *Psychopathia Sexualis*. Every known variation is described on what Durrell calls the theme of love, but what is more correctly described as sexual experience. Here are no moral judgments. The actors approach each other, pause to embrace, float apart, unable like true psychopaths to make enduring close relationships, or to accept biological responsibility for their acts. Murder, suicide, satiety, disgust abound, but only one child out of all this sexual activity, and no pure woman or man. The novelist sees and describes the impurity of humankind and shows without comment—perhaps without intention—the dangers to life of the sterile separation of sex from its original creative purpose, of birth prevention without family planning.

The self-styled modern humanist finds the problem simple and the solution obvious. The problem is "to reduce the illegitimate birth-rate" and the solution "providing sex education and contraceptive advice to the young and to liberalize the abortion law" (Hubble, 1964).

Such prescriptions would be effective for the hedonists who wish to enjoy regular or chance sexual experience without the biological consequences or the responsibility of marriage. Success assumes that public opinion is ready to adopt this departure from long-established codes of behaviour, that one or other of the parents or the landlady would provide a cohabiting home encouraging men and women to enjoy something beyond their means—a sort of sexual hire-purchase scheme. At a time when schoolchildren know the facts of life and have access to contraceptives, it is hard to believe that the illegitimacy rate would be rising if all that is lacking is sex education and contraceptive skill.

Work of Leontine Young

Are there any observations of human behaviour on which firm conclusions could be based? Leontine Young, Professor of Casework in the School of Social Administration of Ohio State University, has recorded casework observations on mothers of illegitimate babies in her book *Out of Wedlock*. One result of her inquiry is startling in its simplicity. It seems that one important cause of illegitimate pregnancy is no more and no less than a girl's compulsive wish to be pregnant, not to be married, not necessarily to possess a baby, but to be pregnant.

Leontine Young's population may be highly selected, her objectivity suspect, the accuracy of the data unchecked and uncheckable. The subject is an emotional one. There are too many protective skins to be dissected away by both questioner and questioned before the central truth is bared. Indeed, there may be no central truth, only somewhere a point of balance between opposing and shifting motives, obsessions, compulsions, rationalizations. Even the family background may only be seen through the lens of the informant's own character and bias. Despite all this the case for the existence of the groups described is convincingly made.

Some strange features of illegitimate pregnancy include the effectiveness of one act of intercourse and the rarity of miscarriage and pregnancy vomiting. Despite knowledge of contraception and of abortion possibilities very few girls try to avail themselves of either. The general pattern of the plan is to achieve a pregnancy, to carry it well, to do nothing to disturb it—in short, to seem to want to be contentedly and successfully pregnant. Other traditional patterns are in the record: adolescent pregnancy, extramarital pregnancy, pregnancy within what is a working marriage though blessed neither by church nor by law, and accidents inevitable with that form of family planning called premarital intercourse.

Under many of these conditions illegitimate babies can be absorbed into family life. The problems that exist are human rather than social ones. Excluding these, the big remaining group, needing so much help from moral and social workers and from hospital staff, includes those women who seem compulsively to obey or to need to act out a fantasy by becoming pregnant, in which no importance attaches to a real father or a real baby, and for which her own responsibility is almost denied.

Parent-dominated Home

Leontine Young describes the common family background of mother-dominated or father-dominated home. Here during an unhappy childhood the girl has been drawn into the vortex of passion by quarrels, sarcasms, plots, all originating in the mother-father tensions. The growing girl cannot escape into maturity and independence, so intertwined become the emotional lives of all three. Sometimes the home is literally broken, sometimes not, but no member of the family is accorded by the others the essential dignity of a separate emotional existence.

The dominating mother, dissatisfied with her femininity, envies her husband his chromosomes, while despising the man that they have built. Such a mother emotionally castrates her son, but previously unsuspected damage to the daughter is revealed in this study. Bound to her mother, the girl cannot form any relationship in which her mother is not intimately concerned. No real emotional relationship accompanies sexual relationship with a man who remains an instrument to be used rather than a person. Met by chance, his name may be unknown and his looks unremembered. If claiming rape, the girl seems to have acquiesced readily. A black-out or a drugged drink explains her waking in a strange bedroom. But the pregnancy is valuable witness to her womanhood and gives her a false sense of the maturity that she lacks. The pregnancy,

with a deeper analysis, is her self-inflicted punishment, symbol of the hatred that she feels but cannot express against her mother.

The dominating father is cruel, abusive, punitive. It is impossible to satisfy his endless demand for obedience or to accept his refusal to allow pleasure except of his giving. The daughter's good behaviour is a protection for the mother, who becomes a sister in suffering. Pregnancy is the ultimate rebellion and the baby a source of power. Girls from such families flirted mildly with men known to be selfish, irresponsible, and sadistic, and to care nothing for the girl's welfare. After the inevitable pregnancy the man's memory was either clothed with romanticism or made the target for vindictive fury.

Important Lessons

Other patterns teach important lessons. The illegitimate girl deprived of family bonds, perhaps brought up in a home, is often unable to control the emotional drives of adolescence. A man who seems to promise the personal security so desperately wanted finds her an easy prey, and so illegitimacy perpetuates itself across the generations. The mentally handicapped girl who has been protected within her family or abandoned to a mental colony may, because she has never had responsibility, be unable to protect herself. Her misfortune may be a lack more of training than of intelligence. The spoiled girl who has always spurned discipline can use a pregnancy to dominate her parents and to destroy their happiness.

Munchhausen women, who inhabit a fantasy world, fill doctors and nurses with tales of extravagant adventure, of mysterious strangers, of a wonderful future. They convince the unwary because their fantasies have for them the stark reality of dreams. The pregnancy achieved in this world of dreams is, alas, only too real.

For a girl from a good home who is not at all delinquent the compulsions of sex may represent an acute crisis. The seemingly happy daughter may feel heartsick, lonely, and neglected, and find with a boy of like outlook the mutual comfort of sexual relations. Unlike the others, she does not by her behaviour reveal a damaged personality.

For the women in such a study the pregnancy serves a useful, albeit destructive purpose. They are driven to compulsive actions in their panic flight from their emotional dilemmas. Many are mentally sick. They lack neither sexual knowledge nor access to contraceptives. But to use contraceptives or to find an abortionist either implicates them in a responsibility for the pregnancy which they are afraid to face, or prevents or stops the pregnancy which they ardently desire.

Leontine Young's study shows illegitimacy to be a problem as complex as human behaviour, with so many groups whose clinical existence is beyond doubt. That at different times and in different cultures the numerical distribution of these groups would vary seems likely. The conclusion is therefore that careful studies are needed rather than commonsense solutions based on preconceived ideas and prejudices.

Experience at Queen Charlotte's Hospital

Some attempt has been made at Queen Charlotte's Maternity Hospital to test Leontine Young's theories. In 1960 two medical social workers, Miss Jones and Mrs. Earwaker, studied the "provocative theory . . . that having a child out of wedlock might not be accidental; that in many cases the girl,

unaware of her own motives, may have wanted to become pregnant and to have an illegitimate child." They have kindly allowed quotation from their unpublished report.

A prospective study was made of the family background and relationships of 50 consecutive unmarried antenatal patients, booking for delivery. Criteria were that the patient should be white, entitled to hold a British passport, a primigravida, and unmarried at the birth of the baby.

The mean age of the unmarried mothers was 21.2 years, compared with 24.2 in the controls, where there were fewer in the age-group 16 to 20 years (19:7). Occupation did not differ significantly. In family relationship 70% of unmarried, compared with 20% of married, showed hostility to one or other parent, while only 20% of unmarried, compared with 72% married, had a close relationship with both. Mother-dominance in the family was described by half the unmarried girls, and marked hostility to the father in 46% of unmarried and only 14% of married. Father was dominant in one-third of the families of unmarried girls; from many he was absent. The study seemed to support Miss Young's contention that there would be a high frequency of unsatisfactory home background with unevenly matched parents.

The majority of the unmarried mothers (68%) had no deep emotional involvement with the putative father. Many did not know his name, had met once or twice only, and made no further contact. On the other hand, 16 girls had a deep attachment, of whom 12 married after the confinement, and nine had been cohabiting before. Some were awaiting divorce. In these circumstances the illegitimate birth found its own solution within the framework of family life, and without producing a difficult social problem. In no case were contraceptives used or abortions sought or attempted. Only one, a 15-year-old girl, disclaimed knowledge of "the facts of life."

When it is added that five said that they wanted to be pregnant, three were only worried lest they might not be pregnant, and 12 expressed pride in their pregnancy, this whole collection of data makes it unlikely that these illegitimate births would have been avoided by sex education, contraceptive teaching, or the legalization of voluntary abortion.

Whatever the cause of illegitimacy, the family background of the girl and her emotional relations with her parents are of great importance. In advising her and in helping to solve her problem her need for psychological help should be considered.

Conclusion

Immoral, wicked, vicious, unfortunate, wronged, ignorant—all these diagnoses colour the picture. Few concerned try to discover what is really wrong. The too-ready pity of the doctor may lead to unwise advice. Perhaps only through fully experiencing the pregnancy, facing the result, and possessing and caring for the baby can the girl penetrate the obscuring veil of fantasy, self-deceit, self-torture, to emerge into the necessary world of reality. Cold and hard this may be, but perhaps it is her one chance to be freed from her crippling involvement in the web of family emotions. Many of these girls are mentally sick people whose self-prescribing of a pregnancy has only added one more social problem for themselves, their families, and the community.

REFERENCES

- Hubble, D. (1964). *Lancet*, **1**, 995.
Young, L. (1954). *Out of Wedlock*. McGraw-Hill, London.